



**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET, ROOM 525
LOS ANGELES, CALIFORNIA 90012-3873
PHONE: (213) 974-8301 FAX: (213) 626-5427

WENDY L. WATANABE
AUDITOR-CONTROLLER

June 20, 2013

TO: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe
Auditor-Controller

SUBJECT: **CALIFORNIA INSTITUTE OF HEALTH & SOCIAL SERVICES, INC.
DBA ALAFIA MENTAL HEALTH – A DEPARTMENT OF MENTAL
HEALTH CONTRACT SERVICE PROVIDER – PROGRAM REVIEW –
FISCAL YEAR 2011-12**

We completed a program compliance review of California Institute of Health & Social Services, Inc. dba Alafia Mental Health (CIHSS - Alafia or Agency), which included a sample of billings from January and February 2012. The Department of Mental Health (DMH) contracts with CIHSS - Alafia to provide mental health services, including interviewing program clients, assessing their mental health needs, and implementing treatment plans. The purpose of our review was to determine whether CIHSS - Alafia provided the services and maintained proper documentation, as required by their County contract.

DMH paid CIHSS - Alafia approximately \$2.5 million on a cost-reimbursement basis for Fiscal Year (FY) 2011-12. The Agency provides services to residents of the Fourth Supervisorial District.

Results of Review

CIHSS - Alafia staff had the required qualifications to provide DMH Program services. However, the Agency did not maintain documentation to support 29% of the billings reviewed, the amount overbilled totaled \$1,371. In addition, the Agency needs to improve the quality of documentation in their Assessments, Client Care Plans, Progress Notes, and Informed Consent forms. Specifically, CIHSS - Alafia:

- Did not maintain sufficient documentation to support 10 (29%) of the 35 billings reviewed, resulting in an overbilling of \$1,371.

CIHSS - Alafia's attached response indicates that they will repay DMH \$1,371.

- Did not describe the clients' symptoms and behaviors consistent with the Diagnostic and Statistical Manual of Mental Disorder to support the diagnosis in seven (35%) of the 20 Assessments reviewed.
- Did not develop specific or measurable objectives in the Client Care Plans for six (30%) of the 20 case files reviewed.
- Did not document objectives that were legible in the Client Care Plans for five (25%) of the 20 case files reviewed.

CIHSS - Alafia's attached response indicates that the Agency will provide training to their treatment staff, and revise their documentation procedures to ensure that their Assessments and Client Care Plans are completed in accordance with the DMH contract requirements.

Details of our review, along with recommendations for corrective action, are attached.

Review of Report

We discussed our report with CIHSS - Alafia and DMH. The Agency's attached response indicates that they agree with our findings and recommendations. DMH will work with CIHSS - Alafia to ensure that our recommendations are implemented.

We thank CIHSS - Alafia management and staff for their cooperation and assistance during our review. Please call me if you have any questions, or your staff may contact Don Chadwick at (213) 253-0301.

WLW:AB:DC:EB

Attachment

c: William T Fujioka, Chief Executive Officer
Dr. Marvin J. Southard, Director, Department of Mental Health
Dr. William T. Marshall, President, Board of Directors, CIHSS - Alafia
Colleen Anderson, Executive Director, CIHSS - Alafia
Public Information Office
Audit Committee

**CALIFORNIA INSTITUTE OF HEALTH & SOCIAL SERVICES, INC.
DBA ALAFIA MENTAL HEALTH
DEPARTMENT OF MENTAL HEALTH
FISCAL YEAR 2011-12**

BILLED SERVICES

Objective

Determine whether California Institute of Health & Social Services, Inc. dba Alafia Mental Health (CIHSS - Alafia or Agency) provided the services billed to the Department of Mental Health (DMH) in accordance with their DMH contract.

Verification

We selected 35 (3%) billings from 1,325 approved Medi-Cal billings for January and February 2012, which were the most current billings available at the time of our review (October 2012). We reviewed the Assessments, Client Care Plans, Progress Notes, and Informed Consents in the clients' charts for the selected billings. The 35 billings represent services provided to 20 clients.

Results

CIHSS - Alafia did not maintain documentation to support 10 billings, totaling \$1,371. Specifically, the Agency billed DMH for:

- Three Mental Health Services billings, totaling \$531, in which the Progress Notes did not describe what the clients or service staff attempted and/or accomplished towards the Client Care Plan objectives.
- Seven Medication Support Services billings, totaling \$840, in which the Progress Notes were illegible. DMH policy states that documentation should be legible for reimbursement. Two Auditor-Controller clinicians reviewing the Progress Notes were not able to read and understand the Progress Notes including the intervention and medication prescribed due to the handwriting being illegible. In addition, DMH staff reviewed the same documentation and agreed with our finding.

In addition, the Agency needs to improve the quality of documentation in their Assessments, Client Care Plans, and Informed Consents in accordance with the DMH contract requirements.

Assessments

CIHSS - Alafia did not adequately describe the clients' symptoms and behaviors consistent with the Diagnostic and Statistical Manual of Mental Disorder (DSM) to support the diagnosis for seven (35%) of the 20 Assessments reviewed. The DSM is a

diagnostic manual published by the American Psychiatric Association for mental health professionals, which lists different categories of mental disorder and the criteria for diagnosing them. The DMH contract requires the Agency to follow the DSM when diagnosing clients. This finding was also noted during our prior monitoring report.

Client Care Plans

CIHSS - Alafia did not complete some elements of seven (35%) of the 20 Client Care Plans in accordance with their DMH contract. Specifically:

- Six Client Care Plans did not contain specific or measurable objectives. This finding was noted during our prior monitoring review.
- Five Client Care Plans did not contain legible Medication Support Services objectives.
- Two Client Care Plans did not contain objectives that related to the presenting problem, diagnosis, or functional impairment documented in the Assessments. This finding was noted during our prior monitoring review.
- One Client Care Plan did not contain a Medication Support Services objective although medication services were provided.

The number of incomplete Client Care Plans in the examples above exceeds the overall number of Client Care Plans reviewed because some Client Care Plans contained more than one deficiency.

Informed Consent

We were unable to tell if the Agency documented Informed Consent for medication for three (50%) of the six clients sampled who received psychotropic medication, because the consents were illegible. Informed Consent documents the clients' agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks.

Recommendations

CIHSS - Alafia management:

1. **Repay DMH \$1,371.**
2. **Ensure that Assessments, Client Care Plans, and Progress Notes are completed in accordance with their DMH contract.**

3. Ensure that documentation related to Medication Support Services including Client Care Plans, Informed Consents, and Progress Notes are legible.

STAFFING QUALIFICATIONS

Objective

Determine whether CIHSS - Alafia's treatment staff had the required qualifications to provide the services.

Verification

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for 15 of CIHSS - Alafia's 52 treatment staff, who provided services to DMH clients during January and February 2012.

Results

Each employee reviewed had the qualifications required to provide the billed services.

Recommendation

None.

PRIOR YEAR FOLLOW-UP

Objective

Determine the status of the recommendations reported in the prior Auditor-Controller monitoring review.

Verification

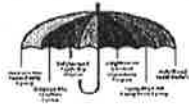
We verified whether CIHSS - Alafia had implemented the two recommendations from our July 28, 2009 Fiscal Year 2008-09 monitoring review.

Results

CIHSS - Alafia did not implement one recommendation from the prior monitoring report. As previously indicated, the outstanding finding related to Recommendation 2 in this report.

Recommendation

Refer to Recommendation 2.



California Institute of Health & Social Services, Inc.
8929 South Sepulveda Boulevard, Suite 200
Los Angeles, CA 90045
Phone: (310) 645-5227 Fax (310) 645-9840



March 27, 2013

Ms. Wendy L. Watanabe, Auditor-Controller
County of Los Angeles Department of Auditor-Controller
Kenneth Hahn Hall of Administration
500 West Temple Street, Room 525
Los Angeles, California 90012

Subject: Response to Contract Compliance Review -- Fiscal Year 2011-2012 of
California Institute of Health & Social Services, Inc. dba Alafia Mental Health

Dear Ms. Watanabe:

In response to the contract compliance review dated February 6, 2013, the California Institute of Health and Social Services, Inc. (CIHSS-Alafia) has reviewed your recommendations and will implement the following Corrective Action Plan (CAP):

Billed Services Recommendations:

1. Repay DMH \$1,371.

CAP: CIHSS-Alafia agrees to repay \$1,371 to the Department of Mental Health from non- DMH funds.

2. Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with their DMH contract.

CAP: The Clinical Director and Quality Assurance Team shall ensure all Assessments, Client Care Plans, and Progress Notes are completed in accordance to our DMH contract.

Assessments

To ensure that the symptoms and behaviors described in the Assessments adequately support the diagnosis consistent with the DSM-IV, CIHSS-Alafia will train all staff on compliance with this requirement through the DMH-provided basic documentation training, webinars, bi-monthly in-house training, and training during group and individual supervision hours. The Quality Assurance Team will conduct a monthly review to ensure that all Assessments are in accordance with our DMH contract.



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Client Care Plans

CIHSS-Alafia will conduct in house trainings that pertain to the development of the Client Care Plan in accordance with our DMH contract. Trainings will ensure that the Client Care Plan contain specific/measurable objectives that the therapist, client and caregiver understand. Supervisors will review all Client Care Plans to ensure that objectives are specific and quantifiable. Supervisors will also review all Client Care Plans to ensure that objectives pertain to the client's presenting problem, diagnosis or functional impairment. All new staff will be required to attend basic documentation training provided by DMH. The Quality Assurance Team will conduct a quarterly review to ensure that Client Care Plans are in accordance with our DMH contract.

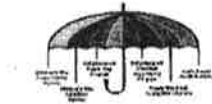
With regard to Medication Support Services objectives, the psychiatrist will develop an objective with the client and complete a "Medication Support Objectives/Interventions" form (see attached), which will be signed by the psychiatrist, caregiver, and client. The psychiatrist will give this signed form to support staff, who will transfer the information and type the medication support objective in the client's CCCP. The psychiatrist will sign and obtain the client's signature on the CCCP at the client's next medication support service appointment. The signed "Medication Support Objectives/Interventions" form will be filed with the client's CCCP. To aid in developing a medication support objective, the psychiatrist will communicate with the client's therapist about the client's mental health treatment via the "Medication Support Services Communication" form. The client's therapist will provide the psychiatrist this form prior to the client's medication support service appointment.

3. **Ensure that documentation related to Medication Support Services including Client Care Plans, Informed Consents, and Progress Notes are legible.**

CAP: The Clinical Director and Quality Assurance Team shall ensure that documentation related to Medication Support Services are legible.

Client Care Plans

The psychiatrist will record the medication support objective in the "Medication Support Objectives/Interventions" form (see attached), which will be signed by the psychiatrist, caregiver, and client. Support staff will obtain this form from the psychiatrist, type the medication support objective in the client's CCCP, and print out the CCCP. The psychiatrist will sign and obtain the client's signature on the CCCP at the client's next medication support service appointment. Support staff will file the original form and the CCCP in the client chart.



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Informed Consents

Consent for Medication Support Services will initially be handwritten by the psychiatrist, client and/or caregiver signatures obtained, which will then be typed by support staff. The typed Informed Consent will then be reviewed and signed by the psychiatrist and client and/or caregiver.

Progress Notes

Progress Notes will initially be handwritten by the psychiatrist, which will then be typed by support staff. The typed progress note will then be reviewed and signed by the psychiatrist.

Prior Year Follow-Up Recommendation:

1. **Refer to Recommendation 2. (Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with their DMH contract.)**

CAP: Refer to response to Recommendation 2.

We appreciate the recommendations outlined in your report. CIHSS-Alafia has taken steps to ensure the recommendations stated in the Contract Compliance Review were implemented immediately. Additional individual and/or group In-Service trainings for all clinical staff have been scheduled to start March 12, 2013 and continue to take place throughout this fiscal year. In addition, Clinical Supervisors have been instructed on the importance of ensuring all clinical documents have been reviewed, properly signed, and maintained in accordance with DMH policy.

Sincerely,

A handwritten signature in dark ink, appearing to read "William T. Marshall", written over a horizontal line.

William T. Marshall, Ph.D.
President/CEO

Cc: Colleen Anderson, Executive Director, CIHSS
Diana Weaver, CFO, CIHSS
Richard Sohn, Clinical Director, CIHSS
William T. Fuijoka, Chief Executive Officer
Dr. Marvin J. Southard, Director, Department of Mental Health